New England Deaconess Hospital
Boston, Massachusetts

pulse

VOLUME 27 — NUMBER 7 APRIL 1974

Nutrition saves

Good nutrition saves time, money, and health. The four Deaconess dietition trainees held a food fair in the cafeteria on March 5-9 in conjunction with National Nutrition Week to show employees that planning good meals can include economy.

"Everybody is so aware of the high cost of food," said Miss Patricia Keaney, R.D., associate director of dietetics and dietitian counselor for the trainees. "Can people still feed their families with the same quality of food now that prices are up?"

The food fair answered "yes" with an imaginative display of food samples, pamphlets, and recipes illustrating how to get the most food value for your money. It was planned by Miss Jamie Davidson, Miss Elaine Bielawa, Miss Mary Driscoll, and Miss Joanne Wade.

Although Americans may be the wealthiest people in the world, money we spend on food is not spent too wisely. In 1970 our per capita consumption of the Basic Four Foods so essential to health and well being was actually less than our consumption of foods eaten just for fun. With food prices so noticeably high now, we will be forced to re-examine our eating habits. When we must buy the Basic Four Foods first and the luxuries later, it is still surprising how far the shrinking dollar goes. Follow these tips and see how well you economize

Plan menus around the Basic Four — meat, dairy, fruits and vegetables, bread and cereals — and advertised meat specials. Clip and carry food ads and coupons with your shopping list. The Sunday and Thursday *Globe* and *Herald American* carry many supermarket advertisements announcing specials.

When food shopping, eat before you shop, and shop alone to resist impulse buying. Read labels and consider nutrients and price per serving before you buy. Nutrition is often the same in lesser grades, so don't choose foods for beauty or size.

Protect your food purchases by taking them home immediately. Stow frozen foods first. For freezer storage, date and list each food, then use it before quality and flavor deteriorate. Keep the freezer filled to conserve power and insulate food. For refrigerator storage, the opposite is true. Food should not be crowded to allow room for air to circulate. Meats go to the coldest shelf, loosely wrapped; produce into the vegetable crisper unwrapped, or on a lower shelf in a plastic bag.

More than half the food we buy is packaged, canned, frozen, and processed for quick and easy preparation. Frozen orange juice, some canned vegetables and soups, nonfat dry milk, and instant potatoes actually cost less than their fresh counterparts. When the cook is also a busy Deaconess em-

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Miss Ronda Gamble (far left), nursing supervisor, selects a tasty treat from Miss Mary Driscoll and Miss Joanne Wade (right), dietitian trainees, at the food fair.

Hemodialysis Unit marks third year on Palmer 2

This month marks the third year that the hemodialysis unit, as a distinct entity, has been in operation. Started in April of 1971 on Palmer 2, the four bed unit has five kidney machines and is open from Monday to Friday, 7 A.M. to 3:30 P.M.

Dialysis was originally performed in the surgical suite as early as December, 1969, by Dr. Frank J. Takacs, chief of nephrology at the Lahey Clinic and medical director of the hemadialysis unit at the Deaconess, Dr. Richard M. Finkel, also from the Lahey Clinic, and a medical technician.

Miss Kathy Johnson, R.N., was hired and trained to perform dialysis treatments under the supervision of Miss Florence McCarthy, Palmer Supervisor, and Dr. Frank Takacs. Miss Johnson had the unit on Palmer 2 set up and ready for operation in April, 1971. The initial unit had only two beds and Miss Johnson was the only staff.

With an increase in the number of treatments came an increase in staff. There are now four nurses assigned to the unit. Miss Diana Knowles, R.N., is the senior nurse and serves as a liaison between nursing service and the dialysis unit. Miss Johnson and Mrs. Pat Conway, R.N., and Mrs. Janet Bensky, R.N., are the other nurses.

Dr. Frank J. Takacs is the medical director of the hemodialysis unit. His associate is Dr. Richard M. Finkel. Dr. Cheriyath Ravindranath is the nephrology fellow on the unit.

The unit is one of the few in the area to treat diabetics. It does no chronic dialysis. Such patients are referred to chronic dialysis facilities after starting at the Deaconess. Most of the patients are headed for transplants or are undergoing acute dialysis due to kidney failure caused by trauma or post operative complications. The kidney machine will take over until the patient's kidneys can resume functioning.

With five machines, there are physical facilities to dialysize comfortably four patients, and five in an emergency. Out-patients come in for di-

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Pictured are (l. - r.): Mr. Hubert Sycamore, assistant director, Dr. Richard H. Overholt, and Mr. Ed Girvan, field superintendent for the sheathing contractor, at the presentation.

Dr. Overholt honored

When the ceiling, due to pounding
starts to fall down,
We're giving you this shiny yellow
helmet to protect your crown,
Hoping that you will never have to
use it, though it be near,
We thought you might like it for a
souvenir.

It all started as Dr. Richard H. Overholt sat working at his desk. The vibrations from construction next door caused a piece of the acoustic ceiling to fall on the paper he was writing. To make life a little safer for Dr. Overholt, Mr. John Snow, construction superintendent, presented him with a yellow hardhat and Mr. Ray W. Carlson, clerk of the works, read a poem. Dr. Overholt responded in kind:

Now my cranium is protected
So I work with more verve
And my only strong disorder
Is a sore acoustic nerve!

The drilling of the sheathing is over and the pounding has ceased. The Deaconess has temporarily returned to tranquillity. In celebration of the return to normalcy, Mr. John Snow, Mr. Ed Girvan, field superintendent for the sheathing contractor, Mr. Hubert Sycamore, assistant director of NEDH, and Mr. Ray Carlson, presented Dr. Overholt with a replica of the pile driving hammer,

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Men from Maintenance and Engineering

Mr. Edward Hammonds, painter, applies joint compound to a wall before he paints it.

The men of the Maintenance and Engineering Department may be the unsung heroes of the Deaconess Hospital. They're the ones that "keep this plant operating," as Manager Cornelius H. Keating says.

The project work, such as renovating offices, that everyone associates with maintenance is only a secondary function. Taking care of property and equipment are the routine jobs that keep the hospital open and operating and come first on the list of priorities for maintenance.

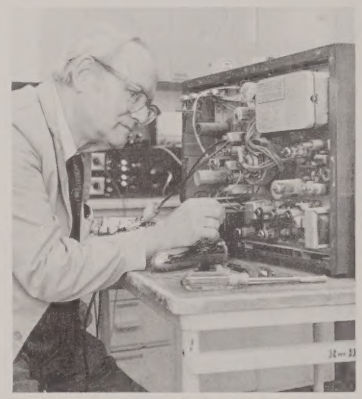
Routine jobs average 300 a week and range from stopping a leaky faucet or changing a light bulb to modernizing an office. Storm damage, malfunctioning operating room equipment, or anything patient connected are emergency situations which are met immediately. However, an emergency to one person may not meet maintenance's definition of a crisis. Losing a new engagement ring down the sink may send a secretary into hysterics, but it's all in a day's work for maintenance and is calmly solved soon enough.

Who makes the buildings of the New England Deaconess Hospital run? Electricians, plumbers, carpenters, steam fitters, tinsmiths, machinists, painters, plasterers, pipe coverers, electronic technicians, furniture refinishers, draftsmen, floor mechanics, first and second class mechanics, heating - ventilating - air conditioning repairmen, a secretary and a stock clerk.

Mr. Roger Pinkham, refrigeration mechanic, puts an engine back in the running.

There are innumerable pieces of equipment that are unique to a hospital, such as those found in X-ray and surgical equipment, that are one of a kind and cannot be purchased anywhere or if purchased would be an exorbitant cost. Rather than replace an entire machine, a machinist will make a part especially designed for that machine. Machinists also make the tiny O ring that doctors sew permanently into the heart.

Electronic technicians take care of more than 500 televisions, 200 pocket pagers, and 70 heart monitors. They maintain 3½ million dollars worth of equipment.



Mr. Albert Sasson, electronics technician, investigates the source of trouble in the television.

Skill is needed to maintain the various air conditioning and heating systems in the hospital because of their sophisticated controls. For example, the operating room humidity of 50 per cent must be strictly maintained. Plumbers are responsible for the equipment involved in dialysis and open heart surgery. Maintenance takes care of all operating room equipment.

Steamfitters take care of the miles and miles of steam piping to see that the varying degrees of pressure are constant. There are ten-inch pipes that must be kept at 120 pounds of pressure and ¾-inch pipes that must be kept at ounces. Steamfitters and plumbers maintain the maze of mechanical room pipes. Pipe coverers insulate all pipes and ducts to prevent the escape of heat or coolant.

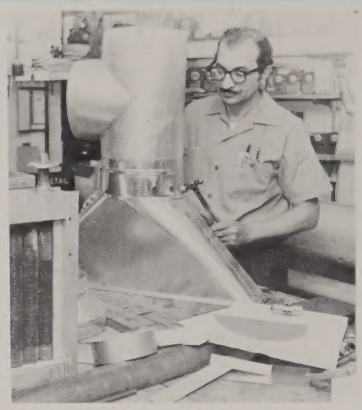
The draftsman coordinates planning with Mr. Hubert Sycamore, assistant director, for renovations and updates existing building plans. The electrical work involved in renovations is done by the electricians. Partitions are constructed by the mason, who also does all the brick and plaster work throughout the hospital complex and does the major patching before the painter steps in to keep the hospital looking bright and colorful.

Rotating throughout the various Deaconess buildings doing the everyday incidental repair work are the floor mechanics. First and second class mechanics repair motors, bearings, shafts, laundry equipment, wheelchairs, beds — anything that's mechanical.

Doors, tables, and cabinets are made by the carpenters. They do the formica work on furniture and are involved in renovations.

The tinsmith is a sheet metal worker who makes ducts for heating and cooling systems, repairs metal furniture and equipment, and makes a variety of pieces of equipment for medical purposes.

Often a piece of equipment will come to maintenance needing a variety of repairs. An electrician will rewire it; a mechanic will change its bearings; a machinist will make a special part; and a painter will repaint it. It goes back to its department looking and working like new.



Mr. Alfred Bonaccorsi, tinsmith, works on air conditioning ducts.

This self sufficient department is like a ship or a small city that can help the Deaconess survive without outside help for an indefinite period. There are tradesmen available 24 hours a day. They have been trained in industry, trade school, night school, or by the biomedical equipment technologists training program established by the Deaconess in 1946 and the first of its kind in the United States.

The men who make up the maintenance department are craftsmen from all over the world — Sweden, Poland, France, Italy, Nova Scotia. Diverse in nationalities, they share one thing in common — skill in their own craft and a respect for each other's craftsmanship.

Mr. Joe Smith, pipe fitter, insulates a basement copper pipe that feeds chilled water to Deaconess 1.

Mr. Charles Spalding, Jr., draftsman, renovates a floor on paper.

Mr. Bill Hurney, machinist, makes a unique part for the X-ray department.

MR. FRANCIS ROGA RETIRES. Mr. Roga retired from the pharmacy department after 19 years of service as senior technician. At his retirement party on February 28, friends and co-workers came to wish Mr. Roga and his wife well in their plans to visit his native Poland. Pictured are (l. - r.): Executive Vice President R. D. Lowry, Mrs. Roga, and Mr. Roga.

Nutrition saves . . .

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ployee, convenience foods, although they cost more, may be more economical in the long run.

Reduce food waste by cooking only the amount of food your family can eat. If there are leftovers, wrap and store immediately in the refrigerator to be imaginatively used in another meal. Bits of cooked fish, chicken, meat, or cheese can be added to tossed salad or combined in a casserole or omelet.

The biggest bargain of all is breakfast. Cereal, fruit, milk, and toast with butter or margarine give you the least expensive and most complete breakfast. Nutritionally, it provides 1/4 of your daily food requirements. You'll work better, feel better, and save more money by avoiding midmorning snacks.

When it comes to planning menus around the Basic Four, start with the meat counter. Two servings of two to three ounces of lean cooked meat or meat substitutes are all you need daily. Good buys for protein are fish and turkey. Plan meatless meals supplemented with high quality protein foods like cheese, eggs, or milk from the dairy case. Cut milk costs with nonfat dry milk and evaporated milk for cooking. Buy low cost, high protein cottage cheese and serve with fruit, salads, and scrambled eggs. In fruits and vegetables eat fresh produce when it is in season and buy frozen and canned varieties when it's not. Don't buy fancy vegetables — and meats — for casseroles. Less expensive ones are just as nutritious. Freeze leftover cooked vegetables and use in soups and stews. For the best in breads and cereals, go back to baking if you have the time. Always buy "enriched" or "whole grain" bread, bakery goods, noodles, and spaghetti products. They cost no more and are better for you. Use pasta and rice to extend more expensive meat, fish, and poultry.

The next time you go food shopping, arm yourself with a newspaper full of coupons, a shopping list, and a cart. Good luck — and see how much nutrition saves.

Friends sponsor Deaconess Night at the "Pops"

All are welcome to enjoy an evening of good music and good company at the Deaconess Night at the Pops at Symphony Hall on May 8 at 8:30 P.M. Mr. Arthur Fiedler will be conducting. Sponsored by the Friends, all proceeds are for the benefit of the School of Nursing scholarship fund.

Tickets cost $6, $7, and $10, and will be sold on April 15-16 in the Farr lobby. They may also be purchased during the first two weeks in April by writing to Mrs. David Palmer, 20 Old Weston Road, Wayland, Mass. 01778. Checks should be made out to the Friends of the Deaconess.

Hemodialysis Unit . . .

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alysis twice a week for six hours. Eight patients a week come to the unit for a total of 20 treatments. Their ages range from 18 to late 50's and their occupations vary; kidney disease knows no barriers.

The Deaconess hemodialysis unit has its own dietitian, social worker, psychiatrist, and chaplain with assigned responsibility for the patients. While the patient is undergoing dialysis he does not have to remain totally inactive — he can sleep, watch television, listen to radio, play card and board games, or read.

Referrals to the unit come from the Lahey, Joslin, and Overholt Clinics, independent staff, and two transplant services. The transplant service is hospital based and utilized by Dr. Anthony P. Monaco of the Deaconess/Harvard Fifth Surgical Service and the Lahey Clinic Transplant Group, headed by Dr. John A. Libertino, director, together with Drs. Blake Cady, Leonard Zinman, and John W. Braasch.

The number of kidney transplants performed at the Deaconess has steadily increased since 1970, the first year for a transplant. Seven were performed in 1971, eleven in 1972, and twenty-four in 1973.

The functions of the kidneys are to remove end products of metabolism, regulate body chemistry and the amount of water in the body, and remove substances not utilized or metabolized in the body. One kidney alone is capable of performing these functions.

A patient on hemodialysis.

When normal kidney function stops or deteriorates from disease, trauma, or post-operative complications, the patient becomes progressively ill as waste products and water accumulate in the body and upset the chemical balance.

Hemodialysis can perform some, but not all, of the functions of natural kidneys. It can remove waste products and water and maintain chemical equilibrium well enough to return the patient to a nearly normal condition for several days. Waste products accumulate in the bloodstream and during normal renal function are eventually removed when the blood passes through the kidneys. As a partial substitute for disabled kidneys, the dialyzers operate outside the patient's own body to cleanse the blood of these wastes. The blood is usually drawn from a tube in an artery and, after passing through the dialyzer, is returned through a tube inserted in a vein.

Dialysis involves the use of a thin, porous membrane (cellulose) that keeps the blood separated from another fluid, the dialysate, in the dialyzer. Waste products in the blood are able to pass through these minute perforations into the dialysate fluid where they are immediately washed away.

There are many different types and size of molecules in the blood. Waste products are molecules small enough to pass through the membrane into the dialysate fluid. Useful proteins and blood cells are too large for the perforations of the membrane. Because the membrane can effectively retain these needed larger substances and eliminate unwanted waste materials, dialysis has become an effective agent in the treatment of renal diseases. Another advantage is that bacteria and viruses cannot be introduced into the blood compartment because they are too large to pass through the perforations in the dialysis membrane.

Excess water is removed from the blood by ultrafiltration. Pressure differences in the dialyzer can be adjusted to remove variable amounts of excess water.

The artificial kidney must be attached to an artery and vein of the patient each time it is used. Repeated use of these vessels requires easy access to the patient's blood. Over the years a number of shunts have been devised which allow the blood to be circulated from vein to artery outside the body. The best locations for a shunt are the forearm or lower leg.

The principle of hemodialysis was described by Drs. Abel, Rowntree, and Turner in 1913. Different apparatus were designed over the years by a number of doctors, but not until 1960 was a way found for continual access to the patient's bloodstream. Until that time hemodialysis was used only for acute renal failure. With the introduction of the arteriovenous Silastic shunt of Scribner and Quinton, hemodialysis was then made available to patients requiring more extended care. This led the way to home dialysis and a new life for many victims of kidney disease.

Dr. Overholt . . .

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a medal for stamina. Dr. Overholt's staff gathered to observe the ceremony and hear yet another of Mr. Carlson's commemorative poems.

Much to everyone's chagrin,
The driving of sheathing for the new Clinic Lab has come to an end.
All of us in the construction field were concerned about your building in such close proximity,
We also know the disturbance this huge hammer has caused you and your staff, and thank you for living with us in such harmony.
So, Dr. Overholt, for bearing with us day by day, for bravery and stamina to take those repetitive blows,
The Guild Moulton Company presents you with this medal of an 010 Vulcan Hammer, but they warn, don't drop it on your toes.

Good spirits can prevail even under the most adverse working conditions.

Ceramics on Deaconess 4

(Last in a series of three articles)

At 9:30 A.M. on Wednesday mornings there are mounds of gray clay sitting on the table in the Deaconess 4 arts and crafts room. In two hours these indistinguishable mounds become vases, ashtrays, figures, or a number of other things.

The ceramics class is part of a program on Deaconess 4 that is organized by Mrs. Irma Kellner, director of volunteers, and Ms. Polly Sullivan, recreational therapist. Every day of the week a volunteer comes to Deaconess to teach arts and crafts. Monday there is dancing. Tuesday the Red Cross teaches weaving. Wednesday the patients work with clay. Thursday they paint. Friday is collage.

The ceramics class started in February with volunteer Zena Bernstein, a free-lance artist. Miss Bernstein graduated from Syracuse University with a bachelor of fine arts degree. She did graduate work at Columbia University in the field of medical and biological illustration, and now illustrates children's books and does anatomical art.

Miss Bernstein arrives early on Wednesdays to prepare for the class of four to five patients. She uses earth clay, a permanent form of clay, and divides it among the students. The class begins with the patients kneading their clods of clay to remove air bubbles.

To encourage members of the class, Miss Bernstein makes demonstration models illustrating each step in the process of transforming clay to final form. Besides serving as guidelines, the models show how easy it is to go from the first to the last step.

"A lot of patients are nervous about starting something, but once they do and can see their own progress in a physical clay form, they are encouraged to do more," says Miss Bernstein.

When the clay is soft and pliable it is ready to be molded. The patients can start their structures from a ball, roll the clay out flat with a rolling pin, or build by using strips. Whatever the method they choose, by using pressure against the clay the patients can start to form shapes that will result in a vase, bowl, or figure.

Miss Bernstein is always nearby to offer assistance and encouragement. "Take a little of the slip (liquidy clay used as an adhesive) and add it to the joints," she tells a woman making a basket. "It makes the shape stronger. Where it's thin, you take a piece of clay, wet it, and work it into the bowl."

When the finished form is still damp, the patient can sand the rough spots. The clay takes two days to dry and then is loaded into a kiln for firing.

The clay can be glazed either before or after firing, but glazing after firing is better because the piece is stronger. After it is glazed, the form is refired.

Patients proceed at their own pace. Some patients do free form work, while others want to learn techniques in clay to be used in their own projects after they are discharged from the hospital.

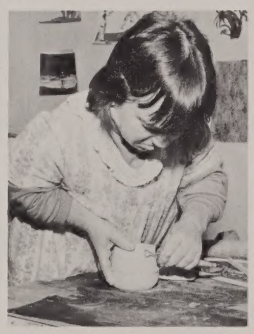
What the class does with the clay depends on the mood of the patients. They can do ceramics or sculpture, but all projects involve working with clay.

Sculpture is taught by a new volunteer, Miss Pat Rosman, a senior majoring in psychology at Boston University. Miss Rosman sculpts as a hobby and wanted to share her interest with the patients on Deaconess 4. She and Miss Bernstein will be interchanging roles in teaching sculpture and ceramics.

Miss Bernstein also teaches collage to the patients on Deaconess 4 on Friday. Collage involves the arrangement of paper, using Elmer's glue, in free form and textures and painted with temperas.

Whether it is collage, clay, painting, weaving, or dancing, the patients on Deaconess 4 have an active recreational program. The volunteer office and recreational therapist work together with dedicated volunteers to provide experiences which entertain as well as teach.

A pot in the making.



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New England Deaconess Hospital
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pulse

The New England Deaconess Hospital is a 482-bed and 16-building complex. Physicians from the Joslin Diabetes Foundation, Inc., the Lahey Clinic, Overholt Thoracic Clinic and the independent medical and surgical staffs serve the needs of their patients at the hospital. The Deaconess is internationally known for diagnosis, treatment and research in brain and chest surgery, cancer, diabetes and general medicine.

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MEN FROM MAINTENANCE AND ENGINEERING:
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